



Application Data Sheet

Application Information

Application number:: 10/748,765
Filing Date:: 12/29/03
Application Type:: Regular
Subject Matter:: Utility
Suggested classification::
Suggested Group Art Unit::
CD-ROM or CD-R??::
Number of CD disks:: 1
Number of copies of CDs:: 1
Sequence Submission:: Yes
Computer Readable Form (CRF)::
Number of copies of CRF::
Title:: Methods of Treating and/or Preventing
Autoimmune Diseases
Attorney Docket Number:: 019856-000210US
Request for Early Publication:: No
Request for Non-Publication:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 2
Small Entity?:: No
Latin name::
Variety denomination name::
Petition included?:: No
Petition Type::
Licensed US Govt. Agency::
Contract or Grant Numbers One::
Secrecy Order in Parent Appl.:: No

Applicant Information

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Illana
Middle Name::
Family Name:: Gozes
Name Suffix::
City of Residence:: Ramat-Hasharon
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address:: 14 Ha'amal Street
City of Mailing Address:: Ramat-Hasharon
State or Province of mailing address::
Country of mailing address:: Israel
Postal or Zip Code of mailing address:: 47445

Applicant Authority Type:: Inventor
Primary Citizenship Country:: Israel
Status:: Full Capacity
Given Name:: Daniel
Middle Name::
Family Name:: Offen
Name Suffix::
City of Residence:: Kfar Haroeh
State or Province of Residence::
Country of Residence:: Israel
Street of Mailing Address::
City of Mailing Address:: Kfar Haroeh
State or Province of mailing address::

Country of mailing address:: Israel

Postal or Zip Code of mailing address:: 38955

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Israel

Status:: Full Capacity

Given Name:: Eliezer

Middle Name::

Family Name:: Giladi

Name Suffix::

City of Residence:: Netania

State or Province of Residence::

Country of Residence:: Israel

Street of Mailing Address:: 40 Sachlav Street

Postal Address Line Two:: Ramat Poleg

City of Mailing Address:: Netania

State or Province of mailing address::

Country of mailing address:: Israel

Postal or Zip Code of mailing address:: 42207

Applicant Authority Type:: Inventor

Primary Citizenship Country:: Israel

Status:: Full Capacity

Given Name:: Eldad

Middle Name::

Family Name:: Melamed

Name Suffix::

City of Residence:: Tel-Aviv

State or Province of Residence::

Country of Residence:: Israel

Street of Mailing Address:: Tagor Street 44

City of Mailing Address:: Tel-Aviv

State or Province of mailing address::

Country of mailing address:: Israel

Postal or Zip Code of mailing address:: 69341

Applicant Authority Type:: Inventor

Primary Citizenship Country:: US

Status:: Full Capacity

Given Name:: Douglas

Middle Name::

Family Name:: Brenneman

Name Suffix::

City of Residence:: North Wales

State or Province of Residence:: PA

Country of Residence:: US

Street of Mailing Address:: 121 Kingston Way

City of Mailing Address:: North Wales

State or Province of mailing address:: PA

Country of mailing address:: US

Postal or Zip Code of mailing address:: 19454-4529

Correspondence Information

Correspondence Customer Number:: 20350

Representative Information

Representative Customer Number:: 20350

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing Date::

This Application An Appn claiming 60/437,650 01/02/03

benefit under 35 USC
119(e) of

Foreign Priority Information

Country::

Application number::

Filing Date::

Assignee Information

Assignee Name::

Street of mailing address::

City of mailing address::

State or Province of mailing address::

Country of mailing address::

Postal or Zip Code of mailing address::